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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

4940/1J

First Named Inventor

Vivian Pecus et al.

COMPLETE IF KNOWN

Application Number

/ To be assigned

Filing Date

Concurrently Herewith

Group Art Unit

To be assigned

Examiner Name

To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SCALABLE EDGE NODE

the specification of which

(Title of the Invention)

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input checked="" type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
50/275,779	March 13, 2001	
60/275,780	March 13, 2001	
60/275,781	March 13, 2001	
60/275,782	March 13, 2001	
60/275,783	March 13, 2001	

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Frank J. DeRosa	26,543	Leslie Restaino	38,893
Seth H. Ostrow	37,410	Ralph F. Hoppin	38,494
Pamela G. Maher	40,712	Matthew J. Marquardt	40,997
David Loewenstein	35,591	Katrine A. Levin	41,941

☒ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Frederick Yu				
Address	Brown Raysman Millstein Felder & Steiner LLP				
Address	900 Third Avenue				
City	New York	State	NY	ZIP	10022
Country	USA	Telephone	(212) 895-2000	Fax	(212) 895-2900

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Vivian		PECUS			
Inventor's Signature				Date	
Residence: City	Falls Church	State	VA	Country	USA
				Citizenship	USA
Post Office Address	3731 B Madison Lane				
Post Office Address					
City	Falls Church	State	VA	ZIP	22041
				Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
Christopher				BENDEN				
Inventor's Signature				Date				
Residence: City		Woodford	State	VA	Country	USA	Citizenship	USA
Post Office Address		8468 Guinea Station Road						
Post Office Address								
City		Woodford	State	VA	ZIP	22580	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
David L.				BULLOCK				
Inventor's Signature				Date				
Residence: City		Conyers	State	GA	Country	USA	Citizenship	USA
Post Office Address		2875 Bonds Lake Road						
Post Office Address								
City		Conyers	State	GA	ZIP	30012	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
Philip				LAUSIER				
Inventor's Signature				Date				
Residence: City		Canton	State	GA	Country	USA	Citizenship	USA
Post Office Address		1005 Iron Mountain Road						
Post Office Address								
City		Canton	State	GA	ZIP	30115	Country	USA

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Mark				KALMBACH			
Inventor's Signature						Date	
Residence: City	Round Rock	State	TX	Country	USA	Citizenship	USA
Post Office Address	2928 Cedar Crest Circle						
Post Office Address							
City	Round Rock	State	TX	ZIP	78664	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Aaron D.				Falk			
Inventor's Signature						Date	
Residence: City	Norwalk	State	CT	Country	USA	Citizenship	USA
Post Office Address	465 Flax Hill Road						
Post Office Address							
City	Norwalk	State	CT	ZIP	06854	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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Additional foreign applications:					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
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			Additional provisional applications:		
Application Number		Filing Date (MM/DD/YYYY)			
60/275,795		March 13, 2001			
60/275,804		March 13, 2001			
60/275,813		March 13, 2001			
60/275,815		March 13, 2001			
60/275,816		March 13, 2001			
60/275,817		March 13, 2001			
Additional U.S. applications:					
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		

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